



# KNOWLEDGE ALONE IS NOT ENOUGH, BUT IT'S A GOOD PLACE TO START

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Nothing seems to bring complex issues into focus better than organizing them on paper. Okay, on a computer screen, but you get my point. So join me as I describe my past two years of education and training as a global health and disaster preparedness fellow, which included courses ranging from the basic introduction to public health to the insightful and predictive global health strategies for security, as well as a host of experiences and people that have enriched my professional life.

My interest in global health began almost 40 years ago when I enlisted as an Army Special Forces medical specialist. It was 1977, the height of the Cold War. The primary mission of my operational "A" team was conducting guerilla warfare behind Soviet lines. In today's world of counter-insurgency operations, it's often forgotten that at one time we trained to actually be insurgents and team medics, who, like me, were not just trained to provide care for teammates in remote locations, but also for host nation guerillas, their families and their villages – including domesticated animals. In essence, long before the term "global health" was coined, U.S. Special Forces were trained to use health care to affect strategic outcomes on the global battlefield.

Now, keeping this early motivation in mind let's fast forward to 2013, past medical school, Desert Storm, my residency, multiple tours, in and out of combat with Marines and more emergency departments than I care to remember. That year the Navy introduced a new two-year graduate medical education program

known as the Global Health and Disaster Preparedness fellowship. The program is designed to develop full-time global health engagement leaders within the Navy and joint commands by providing formal knowledge and training. It is the program my whole career has led to and there is no way I could not have applied. Accepted, I began my journey in the fall of 2014. ^

During the first year, I completed my master's degree in public health, with a global health emphasis at the Uniformed Services University (USU). While at USU, I was taught in a joint environment with instructors from the USU Global Health Department and Center for Global Health Engagement and attended graduate-level classes in global health, biostatistics, epidemiology, international health systems, infectious diseases and global informatics systems.

The second year was an individually tailored combination of short courses and global health missions. I advanced my understanding of global health by attending courses taught by multiple agencies and organizations with varying perspectives, such as the United States Agency for International Development, U.S. Department of Health and Human Services, Federal Emergency Management Agency, Johns Hopkins University, Defense Medical Readiness Training Institute and U.S. Army Medical Research Institute of Infectious Diseases. International missions are conducted in support of the various geographic combatant commands and differ from year to year. This year focused on Guatemala, Angola and India.

To achieve maximum performance in any field you must achieve a balance between experience, training and knowledge. If your life's experience has led you to pursuing a career in global health leadership, then this fellowship is an excellent place to begin. The program provides the initial knowledge needed to staff a diverse community of billets, some of which are still being created, with current assignments including health affairs advisors attached to embassies in Vietnam and Papua New Guinea, as well as the global health engagement officers serving with the Pacific Fleet and Navy Southern Command Surgeon's offices.

As I move on to become the global health engagement officer at U.S. Pacific Fleet, I look forward to the challenges ahead and hope to encourage more Navy officers to follow me in this outstanding and innovative program.